

MINTZ LEVIN

1400 PAGE MILL ROAD
PALO ALTO, CALIFORNIA 94304-1124
(650) 251-7700 TELEPHONE
(650) 251-7739 FACSIMILE
WWW.MINTZ.COM

RECEIVED
CENTRAL FAX CENTER

OCT 23 2006

FACSIMILE TRANSMITTAL SHEET

| | | | |
|----------|---|------------------------------|---|
| TO: | Mail Stop Amendment USPTO Group Art Unit 3743 | FACSIMILE NO.: | (571) 273-8300 |
| FROM: | Flavio M. Rose Reg. No. 40,791 | FACSIMILE NO.: | (650) 251-7739 |
| | | TELEPHONE NO.: | (650) 251-7700 |
| DATE: | October 23, 2006 | PAGE 1 OF: | 12 |
| SUBJECT: | U.S. Pat. Appl. Ser. No. 10/714,467 Filed: November 14, 2003 Entitled: "Remote Control Gas Regulation System" By Kevin D. JORCZAK et al. Atty Dkt. No. 7690-0001 | CONFIRMATION COPY TO FOLLOW: | <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO |

Please see the attached Response for the above-identified patent application.

TRA 2213244v.1

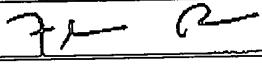
WARNING: This facsimile message and accompanying documents are intended only for the use of the addressee indicated above. Information that is privileged or otherwise confidential may be contained therein. If you are not the intended recipient, you are hereby notified that any dissemination, copying, review, or use of the above message or the accompanying documents is strictly prohibited. If you have received this message in error, please notify us immediately by telephone or facsimile, and mail the original to us at the above address. Thank you.

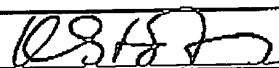
PLEASE CALL (650) 251-7700 IF YOU HAVE ANY PROBLEMS RECEIVING THIS TRANSMISSION
OR HAVE RECEIVED THIS TRANSMISSION IN ERROR.

| | | | | |
|--|--|------------------------|-------------------------|--|
| TRANSMITTAL FORM <small>(to be used for all correspondence after initial filing)</small> | | Application Number | 10/714,467 | RECEIVED CENTRAL FAX CENTER OCT 23 2006 |
| | | Filing Date | November 14, 2003 | |
| | | First Named Inventor | Kevin D. Jorczak | |
| | | Art Unit | 3743 | |
| | | Examiner Name | Amadeus Sebastian Lopez | |
| Mail Stop Amendment | | Attorney Docket Number | 7690-0001 | |

| ENCLOSURES (Check all that apply) | | |
|---|---|--|
| <input checked="" type="checkbox"/> No fee due <input type="checkbox"/> Fee(s) due: \$ _____ Fee Transmittal <input type="checkbox"/> Check enclosed <input type="checkbox"/> Charge Deposit Account No. 18-0580 <input type="checkbox"/> 37 CFR § 1.16 <input type="checkbox"/> 37 CFR § 1.17 <input checked="" type="checkbox"/> The Commissioner is authorized to charge any underpayment or credit any overpayment to Deposit Account No. 18-0580 <input type="checkbox"/> Return postcard <input checked="" type="checkbox"/> Response to Election of Species Requirement <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) - ____ Affidavits/declaration(s) <input type="checkbox"/> ____Month Extension of Time | <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Information Disclosure Statement & PTO-Form 1449 <input type="checkbox"/> Copies of cited reference(s) <input type="checkbox"/> Response to Missing Parts / Incomplete Application <input type="checkbox"/> Declaration(s) by Inventor(s) <input type="checkbox"/> Preliminary Amendment <input type="checkbox"/> Updated Application Data Sheet <input type="checkbox"/> Drawing(s) - ____ Sheets <input type="checkbox"/> Compact Disk(s) - ____ CD(s) <input type="checkbox"/> Petition <input type="checkbox"/> Power of Attorney & Address Indication Form | <input type="checkbox"/> Revocation of & New Power of Attorney, Address Indication Form <input type="checkbox"/> Request for Refund <input type="checkbox"/> After Allowance Communication to a Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Other Enclosure(s): |

| REMARKS | |
|---------|--|
| | |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT | | | |
|--|--|-----------|------------------|
| Firm or Individual Name (print/type) | Flavio M. Rose, Reg. No. 40,791 Mintz, Levin, Cohn, Ferris, Glovsky and Popeo, P.C. | Telephone | (650) 251-7700 |
| Signature |  | Date | October 23, 2006 |

| CERTIFICATE OF TRANSMISSION | | | |
|--|---|------|------------------|
| I hereby certify that this correspondence is being facsimile transmitted to Examiner Amadeus Sebastian Lopez in Group Art Unit 3743 of the USPTO at facsimile number (571) 273-8300 on the date shown below. | | | |
| Name (print/type) | Katherine Stofer | Date | October 23, 2006 |
| Signature |  | | |